

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-50)

SERIAL NO.
10049357
PLACED DATE
APPLICANT(S)

2/16/04 CLAIMS

CLM.	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DER.	IND.	DER.	IND.	DER.
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TOTAL IND.						
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TOTAL CLAIMS						

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TOTAL IND.			
TOTAL DER.			
TOTAL CLAIMS			

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS